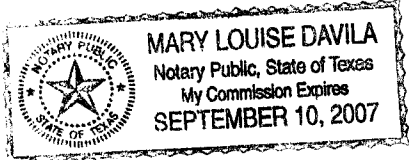
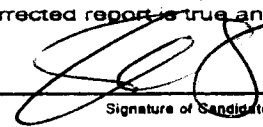
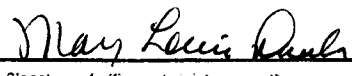


CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

RECEIVED
CITY OF SAN ANTONIO
2004 APR 29 PM 4:31

| | | | | | | | |
|--|--|--|--|-----------|--------|-------|--------|
| 1 ACCOUNT # | | 2 Total pages filed: | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Julian | OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> <tr> <td>Legal</td> <td>Totals</td> </tr> </table> Date Processed Date Imaged | | Receipt # | Amount | Legal | Totals |
| | Receipt # | | | Amount | | | |
| Legal | Totals | | | | | | |
| NICKNAME LAST SUFFIX Castro | ORIGINAL REPORT TYPE <input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report | | | | | | |
| 5 ORIGINAL PERIOD COVERED | Month Day Year Month Day Year 1 / 19 / 05 THROUGH 3 / 28 / 05 | | | | | | |
| 6 EXPLANATION OF CORRECTION | See attached explanation | | | | | | |
| 7 AFFIDAVIT | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">  </div> <div style="width: 60%;"> <p>I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.</p> <p style="text-align: center;">  Signature of Candidate or Officeholder </p> </div> </div> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me by <u>Julian Castro</u> this the <u>29th</u> day of <u>April</u>, 20 <u>04</u>.</p> <p>to certify which, witness my hand and seal of office.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;">  Signature of officer administering oath </div> <div style="width: 30%;"> <u>Mary Louise Davila</u> Printed name of officer administering oath </div> <div style="width: 30%;"> <u>Notary</u> Title of officer administering oath </div> </div> | | | | | | | |
| Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections | | | | | | | |



CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Julian

NICKNAME

LAST

SUFFIX

Castro

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

715 E. Sunshine San Antonio, Texas

78228

☐ Change of Address

5 CANDIDATE /
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(210)

436 5284

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Joaquin

NICKNAME

LAST

SUFFIX

Castro

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE):

APT / SUITE #:

CITY:

STATE:

ZIP CODE

143 Globe St., San Antonio, Texas

78228

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(210)

436 - 5284

9 REPORT TYPE

☐ January 15

☒ 30th day before election

☐ Runoff

☐ 15th day after campaign treasurer
appointment (officeholder only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

THROUGH

Month

Day

Year

1 / 19 / 05

3 / 28 / 05

11 ELECTION

ELECTION DATE

Month

Day

Year

5 / 7 / 05

ELECTION TYPE

☐ Primary

☐ Runoff

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

City Council District 7

13 OFFICE SOUGHT (if known)

Mayor

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

FORM C/OH

COVER SHEET PG 2

2007 APR 29 PM 4:31

15 C/OH NAME

Julian Castro

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE
FROM
POLITICAL
COMMITTEE(S)

•• This box is for notice of political expenditures by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ••

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages18 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 3283.07

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 166898.74

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 218457.97

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

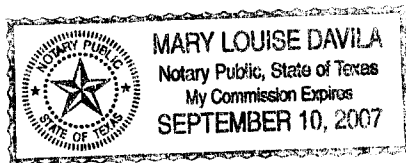
\$ 38239.40

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Julian Castro, this the 29th day
of April, 20 2007, to certify which, witness my hand and seal of office.

Mary Louise Davila
Signature of officer administering oath

Mary Louise Davila
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

2005 APR 29 PM 4:31

| | | | | | |
|---|---|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | | | 1 Total pages Schedule A: 25 | |
| 2 FILER NAME Julian Castro | | | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 3/28/2005 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aimee Bromley | | 7 Amount of contribution (\$) 1000 | 8 In-kind contribution description (if applicable) | |
| 6 Contributor address; City; State; Zip Code 105 E. Elsmere San Antonio, TX 78212 Correction: Page 3 Entry 5 | | | | | |
| 9 Principal occupation / Job title (See Instructions) | | | 10 Employer (See Instructions) | | |
| Date 2/2/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nicholas Dibari | | Amount of contribution (\$) 750 | In-kind contribution description (if applicable) | |
| Contributor address; City; State; Zip Code 521 W. Linda Vista Palm Springs, CA 92262 Correction: Page 4 Entry 2 | | | | | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 2/2/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashley Dibari | | Amount of contribution (\$) 750 | In-kind contribution description (if applicable) | |
| Contributor address; City; State; Zip Code 521 W. Linda Vista Palm Springs, CA 92262 Correction: Page 4 Entry 2 | | | | | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 2/15/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard W. Evans | | Amount of contribution (\$) 500 | In-kind contribution description (if applicable) | |
| Contributor address; City; State; Zip Code 315 Terrell Rd. San Antonio, TX 78209 Correction: Page 4 Entry 5 | | | | | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 2/16/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramiro Valadez III | | Amount of contribution (\$) 500 | In-kind contribution description (if applicable) | |
| Contributor address; City; State; Zip Code 109 Castle Hills Dr. San Antonio, TX 78213 Correction: Page 6 Entry 3 | | | | | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| <p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 1:31
Total pages Schedule A: 25

| | | | |
|--|--|---|---|
| 2 FILER NAME Julian Castro | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 2/25/2005 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lynn Juarez 6 Contributor address; City; State; Zip Code P.O. Box. 460924 San Antonio, TX 78246 Correction: Page 7 Entry 5 | 7 Amount of contribution (\$) 500 | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 3/26/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Marlene Hawkins Contributor address; City; State; Zip Code 601 E. Carlson San Antonio, TX 78208 Correction: Page 10 Entry 3 | Amount of contribution (\$) 100 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 2/25/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jerry Beauchamp Contributor address; City; State; Zip Code 4708 Pecan Grove Blvd. San Antonio, TX 78222 Correction: Page 13 Entry 3 | Amount of contribution (\$) 250 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 3/3/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sylvia Romo Contributor address; City; State; Zip Code P.O. Box 120033 San Antonio, TX 78212+H32 Correction: Page 19 Entry 4 | Amount of contribution (\$) 200 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 3/18/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Robert Cuellar Contributor address; City; State; Zip Code 9400 Doliver Dr. Austin, TX 78748 Correction: Page 23 Entry 4 | Amount of contribution (\$) 100 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 11:31 AM
Total Pages, Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/1/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Richard A. Garcia

6 Contributor address; City; State; Zip Code

7703 Floyd Curl San Antonio, TX 78284

Correction: Page 27 Entry 1

7 Amount of contribution (\$)

100

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Kenneth Kalkwarf

Contributor address; City; State; Zip Code

7703 Floyd Curl San Antonio, TX 78229

Correction: Page 28 Entry 2

Amount of contribution (\$)

200

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/28/05

Full name of contributor

☐ out-of-state PAC (ID# _____)

Aurelio Manuel Montemayor

Contributor address; City; State; Zip Code

5835 Callaghan Rd. San Antonio, TX 77228

Correction: Page 29 Entry 1

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Seunghwann Kim

Contributor address; City; State; Zip Code

15 Parkrow #21 New York, NY 10038

Correction: Page 33 Entry 3

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Evan Norris

Contributor address; City; State; Zip Code

50 Bridge St. #519 Brooklyn, NY 11201

Correction: Page 35 Entry 4

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:31
Total pages: Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/7/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Susan Thomas

6 Contributor address; City; State; Zip Code

322 W. 57th St. #14-R New York, NY 10019
Correction: Page 37 Entry 1

7 Amount of contribution (\$)

250

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Alexis Hult

Contributor address; City; State; Zip Code

235 W. 101st PHB New York, NY 10025
Correction: Page 37 Entry 3

Amount of contribution (\$)

250

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mark Somerstein

Contributor address; City; State; Zip Code

101 Park Avenue New York, NY 10178
Correction: Page 38 Entry 5

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/19/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Laura Cardenas

Contributor address; City; State; Zip Code

5903 Seneca Dr. San Antonio, TX 78238
Correction: Page 40 Entry 5

Amount of contribution (\$)

250

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Caryn Fonberg

Contributor address; City; State; Zip Code

5452 Glen Lakes Dallas, TX 75231
Correction: Page 42 Entry 4

Amount of contribution (\$)

1000

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:31
Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/25/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Jonathan Oram

6 Contributor address; City; State; Zip Code

101 E. 16th St., Apt. 4c New York, NY 10003

Correction: Page 57 Entry 2

**7 Amount of
contribution (\$)**

250

**8 In-kind contribution
description (if applicable)**

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/14/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Turner Family Trust

Contributor address; City; State; Zip Code

No address on check; address not located despite best efforts

Correction: Page 58 Entry 1

**Amount of
contribution (\$)**

100

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/27/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Miguel Lopez

Contributor address; City; State; Zip Code

14444 Vance Jackson San Antonio, TX 78230

Correction: Page 65 Entry 1

**Amount of
contribution (\$)**

75

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Adrienne Cohen

Contributor address; City; State; Zip Code

No address on check; address not located despite best efforts

Correction: Page 67 Entry 3

**Amount of
contribution (\$)**

36

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Cynthia Guerra

Contributor address; City; State; Zip Code

1063 Fairway Dr. San Antonio, TX 78070

Correction: Page 75 Entry 5

**Amount of
contribution (\$)**

25

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

2005 APR 29 PM 4:31

| | | | | | |
|---|---|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | | | 1 Total pages Schedule A: 25 | |
| 2 FILER NAME <div style="text-align: center;">Julian Castro</div> | | | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <div style="text-align: center;">delete entry -- double reported Contributor address; City; State; Zip Code Correction: Page 82 Entry 2</div> | | 7 Amount of contribution (\$) <div style="text-align: center;">0</div> | 8 In-kind contribution description (if applicable) | |
| 9 Principal occupation / Job title (See Instructions) | | | 10 Employer (See Instructions) | | |
| Date 2/5/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norma Cantu Contributor address; City; State; Zip Code 140 Twin Leaf Lane San Antonio, TX 78213 Correction: Page 82 Entry 4 | | Amount of contribution (\$) 200 | In-kind contribution description (if applicable) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 2/4/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaime Rodriguez Contributor address; City; State; Zip Code 2206 Panorama Terrace Los Angeles, CA 90037 Correction: Page 82 Entry 5 | | Amount of contribution (\$) 250 | In-kind contribution description (if applicable) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) delete entry -- double reported Contributor address; City; State; Zip Code Correction: Page 85 Entry 1 | | Amount of contribution (\$) 0 | In-kind contribution description (if applicable) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) delete entry -- double reported Contributor address; City; State; Zip Code Correction: Page 85 Entry 2 | | Amount of contribution (\$) 0 | In-kind contribution description (if applicable) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 1:21
Total Pages Schedule A

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code
delete entry -- double reported

Correction: Page 84 Entry 5

0

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

2/4/2005

Jason Barkham
Contributor address; City; State; Zip Code

100

11611 Chenault St. Los Angeles, CA 90049
Correction: Page 89 Entry 5

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code
Delete entry -- corporate check. Check returned.

Correction: Page 90 Entry 1

0

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code
Delete entry -- corporate check. Check returned.

Correction: Page 91 Entry 2

0

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

2/4/2005

Daniel Oburn
Contributor address; City; State; Zip Code

0

No address located despite best efforts
Correction: Page 92 Entry 1

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:04

1: Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/21/2005

5 Full name of contributor

☐ out-of-state PAC (ID#:

Susan Blackwood

6 Contributor address; City; State; Zip Code

706 Birdsong San Antonio, TX 58258
Correction: Page 93 Entry 5

7 Amount of contribution (\$)

0

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/27/2005

Full name of contributor

☐ out-of-state PAC (ID#:

Batle Dental L.P.

Contributor address; City; State; Zip Code

6300 W. Loop South, Suite 650 Bellaire, TX 77401
Correction: Page 94 Entry 2

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/21/2005

Full name of contributor

☐ out-of-state PAC (ID#:

Greater Faith Institutional Church

Contributor address; City; State; Zip Code

3514 MLK Drive San Antonio, TX 78220
Correction: Page 95 Entry 1

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID#:

David Cunningham

Contributor address; City; State; Zip Code

12814 Country Crest San Antonio, TX 78216
Correction: Page 101 Entry 5

Amount of contribution (\$)

1000

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

delete entry -- double reported

Contributor address; City; State; Zip Code

Correction: Page 103 Entry 3

Amount of contribution (\$)

0

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

2005 APR 29 PM 4:31

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

delete entry -- double reported
6 Contributor address; City; State; Zip Code

Correction: Page 103 Entry 4

0

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

3/15/2005

David Fernandez & Assoc. LLC
Contributor address; City; State; Zip Code

2600 Virginia Ave., Suite 600 Washington, D.C. 20037
Correction: Page 105 Entry 5

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

3/1/2005

Charles Rockefeller
Contributor address; City; State; Zip Code

101 West 81st #509 New York, NY
Correction: Page 110 Entry 1

250

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

3/1/2005

Samuel Thompson
Contributor address; City; State; Zip Code

12 Mellen St. #1 Cambridge, MA
Correction: Page 110 Entry 2

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

2/28/2005

Tobi Molko
Contributor address; City; State; Zip Code

180 W. 20th St. New York, NY 10011
Correction: Page 110 Entry 3

100

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/26/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Claire Colman

6 Contributor address; City; State; Zip Code

2725 End Sleigh Dr. Bloomfield, MI 48301

Correction: Page 110 Entry 5

7 Amount of
contribution (\$)

100

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/5/2004

Full name of contributor

☐ out-of-state PAC (ID# _____)

George Bird

Contributor address; City; State; Zip Code

7811 Valley Trail San Antonio, TX 78250

Correction: Page 111 Entry 1

Amount of
contribution (\$)

500

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Samantha Cohn

Contributor address; City; State; Zip Code

No address located despite best efforts

Correction: Page 111 Entry 3

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

John Snyder

Contributor address; City; State; Zip Code

260 W. 52nd St. #23A New York, NY 15019

Correction: Page 111 Entry 4

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ronald Guyer

Contributor address; City; State; Zip Code

3051 S. Valley View Lane San Antonio, TX 78217

Correction: Page 111 Entry 5

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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The INSTRUCTION GUIDE explains how to complete this form.

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1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

delete entry -- double reported
6 Contributor address; City; State; Zip Code

Correction: Page 112 Entry 1

0

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

delete entry -- double reported
Contributor address; City; State; Zip Code

Correction: Page 112 Entry 2

0

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

delete entry -- double reported
Contributor address; City; State; Zip Code

Correction: Page 112 Entry 3

0

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

delete entry -- double reported
Contributor address; City; State; Zip Code

Correction: Page 112 Entry 4

0

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

delete entry -- double reported
Contributor address; City; State; Zip Code

Correction: Page 112 Entry 5

0

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

12/29/2004

5 Full name of contributor

Sylvia Rivera

6 Contributor address; City; State; Zip Code

St. Mary's University, One Camino Santa Maria San Antonio, TX 78228
Correction: Page 113 Entry 37 Amount of
contribution (\$)

150

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/19/2005

Full name of contributor

Andrew Milk

Contributor address; City; State; Zip Code

910 S. Bedford St. #207 Los Angeles, CA 90035
Correction: Page 114 Entry 2Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/19/2005

Full name of contributor

Jane Gaitan

Contributor address; City; State; Zip Code

2170 W. Kings Highway San Antonio, TX 78201
Correction: Page 114 Entry 3Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

delete entry -- double reported

Contributor address; City; State; Zip Code

Correction: Page 114 Entry 4

Amount of
contribution (\$)

0

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2005

Full name of contributor

Margaret Caines

Contributor address; City; State; Zip Code

1304 Country Glade San Antonio, TX 78216
Correction: Page 115 Entry 1Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/17/2005

5 Full name of contributor

☐ out-of-state PAC (ID#:

Daniel Chandra

6 Contributor address; City; State; Zip Code

23 W. 12th St., 4R New York, NY 10011

Correction: Page 115 Entry 4

7 Amount of
contribution (\$)

100

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/15/2005

Full name of contributor

☐ out-of-state PAC (ID#:

Manuel Cerna

Contributor address; City; State; Zip Code

9626 Mayton Cr. Helotes, TX 78023

Correction: Page 115 Entry 5

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/16/2005

Full name of contributor

☐ out-of-state PAC (ID#:

David Schamis

Contributor address; City; State; Zip Code

No address located despite best efforts

Correction: Page 116 Entry 1

Amount of
contribution (\$)

500

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/9/2005

Full name of contributor

☐ out-of-state PAC (ID#:

Justin Alvarado Brown

Contributor address; City; State; Zip Code

8834 Bely West Hollywood, CA 90069

Correction: Page 116 Entry 2

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/7/2005

Full name of contributor

☐ out-of-state PAC (ID#:

Harry Jay Hulings

Contributor address; City; State; Zip Code

815 S. Sherbourne Dr. #5 Los Angeles, CA 90035

Correction: Page 116 Entry 3

Amount of
contribution (\$)

500

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| | | | | | |
|---|--|--|-------------------------------------|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | | | 1 Total pages Schedule A: 25 | |
| 2 FILER NAME Julian Castro | | | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 3/14/2005 | 5 Full name of contributor Eugene Marck Contributor address; City; State; Zip Code 8018 Kenton View San Antonio, TX 78240 Correction: Page 116 Entry 5 | | 7 Amount of contribution (\$) 75 | | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | | 10 Employer (See Instructions) | | |
| Date 2/25/2005 | Full name of contributor Sylvia Rivera Contributor address; City; State; Zip Code St. Mary's University, One Camino Santa Maria San Antonio, TX 78228 Correction: Page 117 Entry 1 | | Amount of contribution (\$) 300 | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 2/21/2005 | Full name of contributor George Bird Contributor address; City; State; Zip Code 7811 Valley Trail San Antonio, TX 78250 Correction: Page 117 Entry 4 | | Amount of contribution (\$) 500 | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 3/10/2005 | Full name of contributor Charles Imohiosen Contributor address; City; State; Zip Code 1285 Avenue of the Americas New York, NY 10019 Correction: Page 118 Entry 1 | | Amount of contribution (\$) 100 | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date 3/14/2005 | Full name of contributor Enrique Valdivia Contributor address; City; State; Zip Code 530 Donaldson Ave. San Antonio, TX 78201 Correction: Page 118 Entry 2 | | Amount of contribution (\$) 100 | | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |

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CITY CLERK

SCHEDULE A

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2005 APR 29 PM 4:31

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/14/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Bradley Veloz

6 Contributor address; City; State; Zip Code

230 W. Grady Place San Antonio, TX 78212

Correction: Page 118 Entry 3

7 Amount of contribution (\$)

100

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Steven Pliszka

Contributor address; City; State; Zip Code

15710 Mission Crest San Antonio, TX 78232

Correction: Page 118 Entry 4

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mary Rossi

Contributor address; City; State; Zip Code

8620 N. New Braunfels, Suite 500 San Antonio, TX 78217

Correction: Page 118 Entry 5

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Marc Gross

Contributor address; City; State; Zip Code

100 Park Avenue New York, NY 10017

Correction: Page 119 Entry 1

Amount of contribution (\$)

250

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/19/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Arturo Almeida

Contributor address; City; State; Zip Code

203 Coyle Pl San Antonio, TX 78201

Amount of contribution (\$)

200

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 1:31
Total pages Schedule A: 25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/20/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

George Cortez
Contributor address; City; State; Zip Code
P.O. Box 40333 Houston, TX 77240

7 Amount of contribution (\$)

1000

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Bill and Virginia Griffin
Contributor address; City; State; Zip Code
574 Lanark San Antonio, TX 78218

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Jeffrey Shapiro
Contributor address; City; State; Zip Code
14123 Kings Meadow San Antonio, TX 78231

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Bill and Ann Fitzgibbons
Contributor address; City; State; Zip Code
205 Sheffield San Antonio, TX 78213

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Katye Duderstadt
Contributor address; City; State; Zip Code
No address on check; address not located despite best efforts.

Amount of contribution (\$)

300

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:21
Total pages Schedule A: 25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/24/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Alan Scott
Contributor address; City; State; Zip Code
4255 Vilamourn Dr Avon, OH 44011

**7 Amount of
contribution (\$)**

250

**8 In-kind contribution
description (if applicable)**

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

David and Rebecca Heller
Contributor address; City; State; Zip Code
60 Rydalwood Lane Moreland Hills, OH 44022

**Amount of
contribution (\$)**

250

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Whitney and Jacqueline Bailey
Contributor address; City; State; Zip Code
5245 Miller Rd. Brecksville, OH 44141

**Amount of
contribution (\$)**

250

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Domingo Vara
Contributor address; City; State; Zip Code
534 E. Highland Blvd. San Antonio, TX 78210

**Amount of
contribution (\$)**

250

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/4/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Scott Bailey
Contributor address; City; State; Zip Code
317 Harvard Los Angeles, CA

**Amount of
contribution (\$)**

1000

**In-kind contribution
description (if applicable)**

In-kind
contribution for
event expenses.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

2005 APR 29 PM 4:32

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: 25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/6/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Victor and Loretta Miramontes

6 Contributor address; City; State; Zip Code

1106 Country Court San Antonio, TX 78215

7 Amount of
contribution (\$)

500

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/8/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Jose and Frances Guzman

Contributor address; City; State; Zip Code

130 Alexander Hamilton Dr. San Antonio, TX 78288

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/9/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Sulema Carreon-Sanchez

Contributor address; City; State; Zip Code

2215 W. Mistletoe Ave. San Antonio, TX 78201

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Rosie Mendoza

Contributor address; City; State; Zip Code

13606 Bluffcircle San Antonio, TX 78216

Amount of
contribution (\$)

100

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Armando Galindo

Contributor address; City; State; Zip Code

1040 Rayburn San Antonio, TX 78221

Amount of
contribution (\$)

300

In-kind contribution
description (if applicable)In-kind
contribution for
food for event.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:30
Total pages: 3
Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/15/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Fulbright & Jaworski

6 Contributor address; City: State: Zip Code

1301 McKinney, Suite 5100 Houston, TX 77010

7 Amount of contribution (\$)

250

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

M.E. Neenan

Contributor address; City: State: Zip Code

6514 Pemmott San Antonio, TX 78240

Amount of contribution (\$)

95

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Lucas and Maria Montecel

Contributor address; City: State: Zip Code

3483 Riverway San Antonio, TX 78230

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Linda Cantu

Contributor address; City: State: Zip Code

230 E. Sunshine Dr. San Antonio, TX 78228

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/21/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Eugene Thompson

Contributor address; City: State: Zip Code

417 Spriggdale Avenue San Antonio, TX 78220

Amount of contribution (\$)

600

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

In-kind contribution for rent.

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:32
Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/21/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Armando Galindo

6 Contributor address; City; State; Zip Code
1040 Rayburn San Antonio, TX 78221

7 Amount of contribution (\$)

300

8 In-kind contribution description (if applicable)

In-kind contribution for event expenses

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

John and Nancy Bellett
Contributor address; City; State; Zip Code

333 Visor Dr. San Antonio, TX 78258

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Guadalupe Figueroa
Contributor address; City; State; Zip Code

118 Alhaven San Antonio, TX 78210

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Dora and Alfred Ramos
Contributor address; City; State; Zip Code

6701 Blanco Rd. San Antonio, TX 78216

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Santos Vargas
Contributor address; City; State; Zip Code

112 E. Pecan St., Suite 1800 San Antonio, TX 78205

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/1/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Ellen Lockwood

6 Contributor address; City; State; Zip Code

16123 Old Stables Road San Antonio, TX 78247

7 Amount of
contribution (\$)

169.65

8 In-kind contribution
description (if applicable)In-kind
contribution for
event expenses.

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Kelly Valdez

Contributor address; City; State; Zip Code

16123 Old Stables Road San Antonio, TX 78244

Amount of
contribution (\$)

169.65

In-kind contribution
description (if applicable)In-kind
contribution for
event expenses.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Elaine Neenan

Contributor address; City; State; Zip Code

6514 Pemmott San Antonio, TX 78240

Amount of
contribution (\$)

150

In-kind contribution
description (if applicable)In-kind
contribution for
event expenses.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Darrell Mayes

Contributor address; City; State; Zip Code

5903 Eagle Lake Dr. San Antonio, TX 78244

Amount of
contribution (\$)

50

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

H.L. and Christel Villareal

Contributor address; City; State; Zip Code

102 Harcourt San Antonio, TX 78223

Amount of
contribution (\$)

50

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

2005 APR 29 PM 4:32

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/4/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mahendra and Kirti Patel

6 Contributor address; City; State; Zip Code
19318 Crystal Bluff San Antonio, TX 78258

7 Amount of contribution (\$)

1600

8 In-kind contribution description (if applicable)

In-kind contribution for event expenses.

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/9/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Eddie Cavazos
Contributor address;

City; State; Zip Code

P.O. Box 684977 Austin, TX 78768

Amount of contribution (\$)

200

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Gordon and Amy Caplan
Contributor address;

City; State; Zip Code

21 Topping Rd. Greenwich, CT 06831

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Antonio and Cheryl Rigual

Contributor address; City; State; Zip Code

6819 Washington Way San Antonio, TX 78256

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

William Thornton

Contributor address; City; State; Zip Code

4226 Laurel Tr. San Antonio, TX 78240

Amount of contribution (\$)

515.42

In-kind contribution description (if applicable)

In-kind contribution for food for event.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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CITY OF SAN ANTONIO
CITY CLERK
2005 APR 29 PM 4:32

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A: **25**

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/21/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Eugene Thompson

6 Contributor address; City; State; Zip Code

417 Spriggsdale Avenue San Antonio, TX 78220

7 Amount of contribution (\$)

400

8 In-kind contribution description (if applicable)

In-kind contribution for rent.

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Alberto and Julia Magnon
Contributor address; City; State; Zip Code

3715 Sunshine Ranch San Antonio, TX 78228

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Manuel and Patricia Sanchez
Contributor address; City; State; Zip Code

2137 Scarlett Oak Ln Lisle, IL 60532

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Paul Coggins
Contributor address; City; State; Zip Code

3302 Oakhurst St. Dallas, TX 75214

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Lisa and Antonio Alvarado
Contributor address; City; State; Zip Code

802 McNeel San Antonio, TX 78228

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:32

1 Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/25/2005

5 Full name of contributor

☐ out-of-state PAC (ID#)

Terry Hausman

6 Contributor address; City; State; Zip Code

9910 Teal Avenue San Antonio, TX 78224

7 Amount of contribution (\$)

500

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID#)

Isidro Gutierrez

Contributor address; City; State; Zip Code

8306 Littleport San Antonio, TX 78239

Amount of contribution (\$)

35

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID#)

Mike Davis

Contributor address; City; State; Zip Code

P.O. Box 681994 San Antonio, TX 78268

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID#)

Don White

Contributor address; City; State; Zip Code

3737 Broadway, No. 320 San Antonio, TX 78209

Amount of contribution (\$)

1000

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/26/2005

Full name of contributor

☐ out-of-state PAC (ID#)

Daniel and Migdalia Aponte

Contributor address; City; State; Zip Code

25035 Granite Path San Antonio, TX 78258

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:32

Total pages Schedule A:

25

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/26/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Richard Holgin and Yolanda Santos Holgin/Santos

6 Contributor address; City; State; Zip Code

P.O. Box 100687 San Antonio, TX 78201

**7 Amount of
contribution (\$)**

100

**8 In-kind contribution
description (if applicable)**

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Stephanie Alanis

Contributor address; City; State; Zip Code

4 Davenport Lane San Antonio, TX 78257

**Amount of
contribution (\$)**

800

**In-kind contribution
description (if applicable)**

In-kind
contribution for
event expenses.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Raymund Fuentes

Contributor address; City; State; Zip Code

184 E. Oakview Pl. San Antonio, TX 78209

**Amount of
contribution (\$)**

600

**In-kind contribution
description (if applicable)**

In-kind
contribution for
event expenses.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr. and Mrs. Michael Hu

Contributor address; City; State; Zip Code

8822 Wurzbach Rd. San Antonio, TX 78229

**Amount of
contribution (\$)**

500

**In-kind contribution
description (if applicable)**

t-shirts, water for
office, stickers,
cards

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

**Amount of
contribution (\$)**

**In-kind contribution
description (if applicable)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL EXPENDITURESRECEIVED
CITY OF SAN ANTONIO
CITY CLERK**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:32
1 Total pages Schedule F:

10

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4 Date**

3/8/2005

5 Payee name

Bauhus Media Group

6 Payee address; City; State; Zip Code

1212 E. Euclid San Antonio, TX 78212

7Amount
(\$)

9733.8

8 Purpose of payment (See instructions regarding type of information required.)

Correction: Page 139 Entry 4

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/15/2005

Payee name

Allied

Payee address; City; State; Zip Code

3700 Blanco San Antonio, TX 78212

Amount
(\$)

6650

Purpose of payment (See instructions regarding type of information required.)

Signs Correction: Page 150 Entry 3

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

delete entry -- duplicate

Payee address; City; State; Zip CodeAmount
(\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 163 Entry 3

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

delete entry -- duplicate

Payee address; City; State; Zip CodeAmount
(\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 164 Entry 4

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

2005 APR 29 PM 4:32
1 Total pages - Schedule F: 10

The INSTRUCTION GUIDE explains how to complete this form.

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4 Date****5 Payee name**

delete entry -- duplicate

6 Payee address; City; State; Zip Code**7 Amount (\$)**

0

8 Purpose of payment (See instructions regarding type of information required.)

Correction: Page 165 Entry 2

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 165 Entry 3

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 165 Entry 4

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 166 Entry 1

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURESCITY OF SAN ANTONIO
CITY CLERK**SCHEDULE F**

2005 APR 29 PM 4:32

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 10**2** FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4** Date**5** Payee name

delete entry -- duplicate

6 Payee address; City; State; Zip Code**7** Amount (\$)

0

8 Purpose of payment (See instructions regarding type of information required.)

Correction: Page 166 Entry 2

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

KENS-TV

3/14/2005

Payee address; City; State; Zip Code

4801 Fredriskburg Rd. San Antonio, TX 78230

Amount (\$)

19915.5

Purpose of payment (See instructions regarding type of information required.)

TV advertising Correction: Page 171 Entry 2

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 173 Entry 2

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 174 Entry 4

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURESRECEIVED
CITY OF SAN ANTONIO
CITY CLERK
SCHEDULE F2005 APR 29 PM 4:32
Total pages: Schedule F:

The INSTRUCTION GUIDE explains how to complete this form.

10

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

delete entry -- duplicate

6 Payee address; City; State; Zip Code

7 Amount (\$)

0

8 Purpose of payment (See instructions regarding type of information required.)

Correction: Page 175 Entry 4

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 176 Entry 1

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 176 Entry 2

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

delete entry -- duplicate

Payee address; City; State; Zip Code

Amount (\$)

0

Purpose of payment (See instructions regarding type of information required.)

Correction: Page 176 Entry 3

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

10

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4** Date

1/1/2005

5 Payee name

Viva Media

7 Amount (\$)

25000

6 Payee address; City; State; Zip Code

1100 N.W. Loop 410 San Antonio, TX 78213

8 Purpose of payment (See instructions regarding type of information required.)

TV advertising

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

2/1/2005

Payee name

IBC Bank

Amount (\$)

21.9

Payee address; City; State; Zip Code

130 E. Travis San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

Check Fee

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

2/4/2005

Payee name

Village Catering

Amount (\$)

2500

Payee address; City; State; Zip Code

214 South McCadden Place Los Angeles, CA 90004

Purpose of payment (See instructions regarding type of information required.)

Event expenses.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

2/20/2005

Payee name

Gerardo Menchaca

Amount (\$)

708.5

Payee address; City; State; Zip Code

206 E. Rosewood #2 San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Julian's Las Vegas -- hotel

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



POLITICAL EXPENDITURESRECEIVED
CITY OF SAN ANTONIO
CITY CLERK**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

10

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4 Date****5 Payee name**

Gerardo Menchaca

7 Amount (\$)**6 Payee address; City; State; Zip Code**

206 E. Rosewood #2 San Antonio, TX 78212

598.9

8 Purpose of payment (See instructions regarding type of information required.)

Julian's Las Vegas -- Flight

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

New Reach Media

Amount (\$)

2/21/2005

Payee address; City; State; Zip Code

PO Box 782448 San Antonio, TX 78278

205.67

Purpose of payment (See instructions regarding type of information required.)

Data services

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

IBC Bank

Amount (\$)

2/28/2005

Payee address; City; State; Zip Code

130 E. Travis San Antonio, TX 78205

248.41

Purpose of payment (See instructions regarding type of information required.)

Bank fee.

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date**Payee name**

Clear Channel Outdoor

Amount (\$)

3/10/2005

Payee address; City; State; Zip Code

3714 N. Pan Am Expressway San Antonio, TX 78219

10950

Purpose of payment (See instructions regarding type of information required.)

Billboards.

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 4:32

1 Total pages Schedule F:

10

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4 Date**

3/14/2005

5 Payee name

Julian Castro

7Amount
(\$)**6 Payee address;** City; State; Zip Code

715 E. Sunshine San Antonio, TX 78228

368

8 Purpose of payment (See instructions regarding type of information required.)

Reimbursement for campaign expenses.

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/28/2005

Payee name

Gerardo Menchaca

Amount
(\$)**Payee address;** City; State; Zip Code

206 E. Rosewood #2 San Antonio, TX 78212

4215.28

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for campaign expenses incurred between January 1 and March 28, 2005.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

3/14/2005

Payee name

IBC Bank

Amount
(\$)**Payee address;** City; State; Zip Code

130 E. Travis San Antonio, TX 78213

108

Purpose of payment (See instructions regarding type of information required.)

Bank fee.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

3/18/2005

Payee name

SBC

Amount
(\$)**Payee address;** City; State; Zip Code

PO Box 650487 Dallas, TX 75265

51.35

Purpose of payment (See instructions regarding type of information required.)

Telecommunications services

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: **10****2** FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4** Date

3/18/2005

5 Payee name

Munguia Printers

7 Amount (\$)

1348.1

6 Payee address; City; State; Zip Code

2201 Buena Vista St. San Antonio, TX 78207

8 Purpose of payment (See instructions regarding type of information required.)

Printing costs

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

3/18/2005

Payee name

Bauhaus Media Group

Amount (\$)

396.5

Payee address; City; State; Zip Code

1212 E. Euclid San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Advertising services.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

3/18/2005

Payee name

Kathleen Doria

Amount (\$)

1500

Payee address; City; State; Zip Code

140 E. French Place San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Consulting services.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

3/21/2005

Payee name

Eugene Thompson

Amount (\$)

200

Payee address; City; State; Zip Code

417 Spriggsdale Avenue San Antonio, TX 78220

Purpose of payment (See instructions regarding type of information required.)

March rent for eastside office.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURESRECEIVED
CITY OF SAN ANTONIO
CITY CLERK**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

2005 APR 29 PM 1:32
Total pages Schedule F: 10**2 FILER NAME**

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4 Date**

3/23/2005

5 Payee name

Kevin Lopez

6 Payee address; City; State; Zip Code

602 E. Locust San Antonio, TX 78212

7 Amount (\$)

1500

8 Purpose of payment (See instructions regarding type of information required.)

Professional services.

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/28/2005

Payee name

Gerardo Menchaca

Payee address; City; State; Zip Code

206 E. Rosewood #2 San Antonio, TX 78212

Amount (\$)

2776.76

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for travel expenses to Las Vegas, Los Angeles, and other locations incurred between January 1 and March 28, 2005.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/28/2005

Payee name

Joaquin Castro

Payee address; City; State; Zip Code

143 Globe San Antonio, TX 78238

Amount (\$)

430.8

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for travel expenses to Los Angeles incurred between January 1 and March 28, 2005.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/28/2005

Payee name

Guillermo Benavides

Payee address; City; State; Zip Code

7806 Pinebrook San Antonio, TX 78230

Amount (\$)

500

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for cash donation.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



POLITICAL EXPENDITURES**SCHEDULE F**

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

2005 APR 29 PM 4:02

The INSTRUCTION GUIDE explains how to complete this form.

4: Total pages Schedule F:

10

2 FILER NAME

Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4 Date**

4/28/2005

5 Payee name

Lucille Benavides

7 Amount (\$)

500

6 Payee address; City; State; Zip Code

7806 Pinebrook San Antonio, TX 78230

8 Purpose of payment (See instructions regarding type of information required.)

Reimbursement for cash donation.

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

4/28/2005

Payee name

Alex Salaiz

Amount (\$)

200

Payee address; City; State; Zip Code

1059 John Page San Antonio, TX 78228

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for cash donation.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

4/28/2005

Payee name

Dan Markson

Amount (\$)

100

Payee address; City; State; Zip Code

317 Lexington Ave. San Antonio, TX 78215

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for contribution over the limit.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

Date

4/28/2005

Payee name

Selina Gutierrez

Amount (\$)

3.33

Payee address; City; State; Zip Code

4 Sarazen Court San Antonio, TX 78257

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for contribution over the limit.

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED